

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. 09/913574 FILING DATE

APPLICANT(S)

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.				
1		1						
2			1					
3				1				
4					1			
5						1		
6		2		2				
7				2				
8	5		4					
9			1					
10				1				
11	4		4					
12				1				
13	2		1					
14			2					
15	3		2					
16			1					
17				1				
18	1		3					
19			1					
20	2		1					
21	1		2					
22	4		2					
23			2					
24			1					
25				1				
26					1			
27						1		
28							1	
29								1
30								1
31								1
32								1
33	1		1					
34	1		1					
35				1				
36				1				
37	1							
38				1				
39				2				
40				2				
41				2				
42								
43								
44								
45								
46								
47								
48								
49								
50								
TOTAL D.	4		4					
TOTAL P.	52	→	53	→				
TOTAL AMNS	56		57					

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE